



Questions and Answers For Grantees

Patient Eligibility

1. If a patient with a non-targeted cancer (e.g., kidney cancer) comes to a LHD or other DHMH-funded cancer program for help in applying for MCF funds for treatment, can the program apply on behalf of the patient for MCF funds to pay for cancer treatment and/or health insurance for this patient?

Yes. There is no restriction on the type of cancer that may be covered by the MCF funds. Also, the patient does not have to be a client of the health department's screening program to be eligible for payment under an MCF cancer treatment grant.

2. Does a patient have to be a US citizen to qualify for a grant?

No, but the patient must be a Maryland Resident for 6 months.

3. Can a patient have health insurance and still qualify for MCF?

Yes, a patient can have health insurance and still qualify for an MCF grant. The grant could cover the cost of the deductibles, copays and coinsurance.

Application

4. Does the Grantee need to state in the application for a Maryland Cancer Fund Treatment Grant whether or not the Grantee has cancer treatment in their CPEST grant?

The eligible organization applying on behalf of the patient should indicate on DHMH Form 4681 whether or not that cancer treatment funds are available in their current grants.

5. Is there a limited number of cancer treatment grants that a Grantee can apply for?

There is no limit to the amount of applications a Grantee can apply for from the MCF. However, funds for cancer treatment grants are limited and available on a first-come first-served basis.

Use of Funds

6. If the Grantee has funds in their approved Cigarette Restitution Fund (CRF) budget, Cancer Prevention, Education, Screening and Treatment (CPEST) or another appropriation to pay for cancer treatment, can the Grantee reallocate those funds and use MCF funds in its place?

No. If a program has CRF or other funds designated and approved for payment of cancer diagnosis and treatment, the program should expend those funds **first** before applying for an MCF cancer treatment grant. Remember, the MCF is a payer of last resort.

7. Will the MCF funds pay for cancer treatment before the date of application?

No. The MCF does not pay for bills/invoices incurred prior to the start date of the grant. The MCF grant award period is established in the Standard Grant Agreement and funding may **NOT** be used to pay for cancer treatment services retroactively.

8. Is MCF funding available for primary prevention, early detection/secondary prevention, or cancer research?

Along with cancer treatment, the Maryland Cancer Fund is established to also provide funding for primary prevention, early detection/secondary prevention and cancer research. However, funding is limited. At this time, all MCF funding is allocated towards cancer treatment grants.

9. Can the cancer treatment funds be used to help fund salaries?

No. Salary for personnel is not an allowable expense.

10. Can MCF grant funds pay providers on a “fee for service” basis to assist clients who qualify for Medical Assistance only after meeting a spend-down?

Yes, the grantees can use MCF funds up to the patient’s spend-down amount.

11. Why were the MCF Cancer Treatment Grants not set up like Breast Cervical Cancer Program Diagnosis and Treatment Program (BCCDTP), where the patient applies directly to staff at DHMH, and staff at DHMH certify the client’s eligibility, obtain contracts with providers and pay bills for treatment?

The MCF was not set up like the BCCDTP program because the legislative bill that established the Maryland Cancer Fund and the COMAR Regulations specifically state that DHMH has to award the money through grants to eligible persons.

Administrative

12. What are the funding limits for a grant?

The funding maximum is up to \$20,000 can be used toward either: (1) the direct costs of services or (2) the health insurance costs to cover deductibles, coinsurances, copays. The grant may also be used to pay for services not covered under the health insurance policy. In addition, grantees are allowed indirect costs up to 7% of the direct costs.

13. Are the Grantees expected to “case manage” the client?

Grantees are expected to apply on behalf of the client, to be knowledgeable about the Treatment Plan, to receive and pay bills on behalf of the client, and to assure that the service was provided before paying the bill. The MCF does not expect that the Grantees will, for example, assure that the client gets to his/her appointments. The Grantees may provide more case management, but are not required to.

14. Who will collect medical records in order to apply for a MCF Cancer Treatment Grant?

The Grantee applying on behalf of the patient needs to obtain the copies of the patient's bills for payment.

15. Who will obtain the information to complete the MCF Treatment Plan and Budget - Form DHMH 4684?

The Grantee will obtain permission from the patient for medical records release to the Grantee, in conjunction with the provider(s), to complete the Form 4684.

16. How does the MCF Cancer Treatment Grant funding interface with community hospital (financial) assistance programs? Who pays first?

Funds for the MCF are limited. The cancer treatment funds will be awarded on an open and continuous basis as long as funds are available. The community hospitals financial programs will likely function as they did prior to the MCF Program.

17. Who obtains contracts with providers for services?

It is the responsibility of the Grantee to obtain contracts for services.

18. Who will monitor grant expenditures and complete DHMH fiscal forms?

The Grantee is responsible for assuring that the DHMH fiscal forms are completed and submitted by the required timeframe.

19. Will providers or patients be asked to complete the application and/or supply the necessary documentation?

It is the decision of the Grantee applying on behalf of the patient to decide the best course of action to obtain the necessary documentation in order to submit a complete application packet the MCF Coordinator.

20. Does the MCF considering a colonoscopy a diagnostic or screening procedure?

Under the MCF Cancer Treatment Grant, a colonoscopy would be considered a diagnostic screening procedure (the patient must have a finding suspicious of cancer to be eligible for a treatment grant).

21. Is a patient eligible for a second year of MCF Treatment Grant funding if needed and available?

Yes, the client may be eligible for a second year of funding. The Grantee must reapply by submitting an updated Physician's Letter, Treatment Plan and Budget, and Fiscal Budget. Funding is based upon the availability of MCF funds.

22. The MCF grant application asks that a copy of the health insurance be included. Will MCF staff be responsible for enrolling the client into health insurance?

No, the Grantee will be responsible for working with the patient to apply for health insurance and may begin the MCF application process immediately.

23. Does the Fund cover the costs of services beyond diagnosis and/or treatment?

MCF grants can be used for cancer diagnostic testing, staging or treatment, including: surgery, chemotherapy, radiation therapy, hormonal therapy, biopsy, imaging procedures, laboratory testing, home health services, and medical supplies or medical equipment.